

2004 VIRGINIA Form 765

Department of Taxation
P. O. Box 760
Richmond, VA 23218-0760

Unified Nonresident Individual Income Tax Return



FISCAL or SHORT Year Filer: Beginning Date _____ ●

Ending Date _____ ●

For Qualified Owners Of A Pass-Through Entity

Check if - <input type="checkbox"/> Change In Address <input type="checkbox"/> Legal Name Change <input type="checkbox"/> Amended Return <input type="checkbox"/> 760 C Attached	Legal Name of Pass-Through Entity	Official Use Only
	Number And Street	
	Address Continued	FEIN
	City or Town, State And ZIP	Virginia Account Number

1. Virginia Income (From Part II, Line 5)	1.		00	●
2. Total Additions (From Part II, Line 11, Column B)	2.		00	●
3. Subtotal (Add Line 1 and Line 2)	3.		00	●
4. Total Subtractions (From Part II, Line 17, Column B)	4.		00	●
5. Virginia Taxable Income (Line 3 Minus Line 4)	5.		00	●
6. Amount Of Tax (Round To Whole Dollars)	6.		00	●
7. Estimated Tax Paid For Taxable Year 2004	7.		00	●
8. Extension Payment (From Form 760E)	8.		00	●
9. Total Credits (From Attached Schedule CR, Or Line 6, whichever is less)	9.		00	●
10. Total Payments And Credits (Add Lines 7, 8, and 9)	10.		00	●
11. If Line 6 Is Greater Than Line 10, Enter The Difference. This Is The Income Tax You Owe Skip To Line 13.	11.		00	●
12. If Line 10 Is Greater Than Line 6, Enter The Difference. This Is The Overpayment Amount	12.		00	●
13. Addition To Tax, Penalty And Interest				
(a). Addition To Tax. Enter Amount From Form 760C, If Applicable	13(a)		00	●
(b). Penalty - See Instructions. If Owed, Check One And Enter Amount: <input type="checkbox"/> Late Filing Penaty or <input type="checkbox"/> Extension Penalty	13(b)		00	●
(c). Interest - Compute On Amount From Line 11	13(c)		00	●
(d). Add Lines 13(a) - 13(c)	13(d)		00	
14. If You Owe Tax On Line 11, Add Lines 11 And 13(d) -or- If Line 12 Is An Overpayment And Line 13(d) Is Greater Than 12, Enter The Difference. This Is The Amount You Owe . Attach Payment.	14.		00	●
15. If Line 12 Is Greater Than Line 13(d), Subtract Line 13(d) From Line 12. This Is The Amount To Be Refunded To You	15.		00	●

← Staple Check Here

Complete And Attach Schedule L

I the undersigned owner and authorized representative of the pass-through entity declare under the penalties provided by law that this return (including any accompanying schedules, statements and attachments) has been examined by me and is, to the best of my knowledge and belief, a true, correct and complete return, made in good faith, for the taxable year stated, pursuant to the tax laws of the Commonwealth of Virginia. I declare that the pass-through entity has made diligent effort to ensure that the owners who are participating in this return are qualified to do so and that all owners who qualify to participate in this return are doing so. I further declare that the pass-through entity has in its possession a signed statement from each owner participating in the return that grants the pass-through entity the authority to act on the owners' behalf in the matter of the return and that indicates the owners' understanding and acceptance of all the terms and conditions for the filing of such a return.

I authorize the Dept. of Taxation to discuss this return with my preparer. If yes, check here. ☐

Signature Of Authorized Representative Of The PTE - See Instructions	Date	Daytime Phone Number ()
Signature of Preparer	Date	Daytime Phone Number ()
Preparer's Firm Name (Or Yours, If Self-Employed) and Address	Approved Vendor Code	Preparer's FEIN, PTIN Or SSN

For Office Use Only

Coding



PART II : Summary of Participants' Income And Virginia Modifications From Schedules VK-1

Aggregate means the sum of the participants' amounts from the Schedules VK-1 for the referenced line item. Before completing the lines below, please see instructions.

Virginia Income

1. Apportionable Income (Aggregate Schedules VK-1, Line 6) 1.
2. Virginia Apportionment Percentage (Schedule VK-1, Line 7) 2.
3. Virginia Apportioned Income (Multiply Line 1 by Line 2) 3.
4. Income Allocated To Virginia (Aggregate Schedules VK-1, Line 4) 4.
5. Add Lines 3 and 4 5.

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	%
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	00
	00

Virginia Additions

6. Fixed-date Conformity - Depreciation (Aggregate Schedules VK-1, Line 8) 6.
7. Fixed-date Conformity - Other (Aggregate Schedules VK-1, Line 9) 7.
8. Total Fixed-date Conformity Additions (Add Line 6 And Line 7) 8.
9. Interest On Municipal Or State Obligations Not VA (Aggregate Schedules VK-1, Line 11) .. 9.
10. a-c Enter Addition Codes For Individual 10a. • 10a.
- Income Tax Only - (Aggregate Schedules 10b. • 10b.
- VK-1, Line 12) 10c. • 10c.
11. Total Additions (Line 8 Through 10c) 11.

Column A Aggregate

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Column B Apportioned *

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Virginia Subtractions

12. Fixed-date Conformity - Depreciation (Aggregate Schedules VK-1, Line 14) 12.
13. Fixed-date Conformity - Other (Aggregate Schedules VK-1, Line 15) 13.
14. Total Fixed-date Conformity Subtractions (Add Line 12 And Line 13) 14.
15. Income From U.S. Obligations (Aggregate Schedules VK-1, Line 16) 15.
16. a-e Enter Subtraction Codes For 16a. • 16a.
- Individual Income Tax Only 16b. • 16b.
- (Aggregate Schedules VK-1, Line 17) 16c. • 16c.
- 16d. • 16d.
- 16e. • 16e.
17. Total Subtractions (Line 14 Through 16e) 17.

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*** Multiply amount in column A by Virginia Apportionment Percentage, Form 765 Part II, Line 2.**

**2004 Virginia
Schedule L
(FORM 765)**

**Unified
Nonresident Income Tax Return
List of Participants**



Name of Pass-Through Entity	FEIN

Identify the Participants

	Name	Address	Allocation %	SSN	
1.	_____	_____	_____	_____	•

2.	_____	_____	_____	_____	•

3.	_____	_____	_____	_____	•

4.	_____	_____	_____	_____	•

5.	_____	_____	_____	_____	•

6.	_____	_____	_____	_____	•

7.	_____	_____	_____	_____	•

8.	_____	_____	_____	_____	•

9.	_____	_____	_____	_____	•

10.	_____	_____	_____	_____	•

11.	_____	_____	_____	_____	•

12.	_____	_____	_____	_____	•

13.	_____	_____	_____	_____	•

14.	_____	_____	_____	_____	•

15.	_____	_____	_____	_____	•
